THE DEVELOPMENT AND EVALUATION OF A WEB-BASED PROGRAM EMPOWERING NCAA COACHES TO EFFECTIVELY COMMUNICATE WITH STUDENT-ATHLETES OF CONCERN AND MAKE MENTAL HEALTH REFERRALS: A PILOT STUDY

CHATHAM UNIVERSITY
PITTSBURGH, PENNSYLVANIA
Project Rationale & Problem Statement

• College sports culture is unique
  – Barriers to accessing and/or receiving mental health treatment
    • Location of services, Times offered, Provider expertise, Stigma
      – 15.6 to 21.0 % rates of depression in college SA’s
      – High rates for substance abuse, eating disorders, anxiety
      – Suicide is second leading cause of death for persons age 15-23
  – Help seeking behaviors can be hindered by team climate
    • Stigmatization can occur with coaches and teammates
    • Coaches may be an initial point of contact

Gulliver, Griffiths, Christensen (2012); Sherman, Thomson, Dehas, Wilford (2005); Sudano, Miles, Collins (2016)
Research Questions

• Introduce coaches to the constructs of rapport building, help-seeking behaviors, and mental health warnings signs, as well as to increase their awareness of the referral process.

• In accordance with this purpose, our research questions were:
  – What is the impact of a brief web-based educational module on coaches’ self-reported knowledge of (a) rapport building with SAs, (b) help seeking behaviors of SAs, (c) and the mental health referral process? (RQ1)
  – What is the feasibility of the online training program? (RQ2)
Description of Program

- **Six web-based modules**
  1. Warning signs and help seeking behaviors
  2. Barriers to seeking help
  3. Coach-athlete relationships
  4. Case studies: Applying content knowledge to real-life examples
  5. Taking action: Referring a student-athlete
  6. Taking action: Talking to the student-athlete

- **Structure**
  - 15 mins each, approx. 90 mins total
  - User/self-paced

- **Login**
  - Username and password emailed to each coach

- **Troubleshooting**
  - Password reset feature on website
  - Contact project co-leaders
Before you begin, please submit your unique code name for this survey. Your code name is comprised of your mother’s maiden name, followed by the last four digits of your phone number (ex: Smith7645).

Warning Signs and Help Seeking Behaviors

Barriers to Seeking Help

PRETEST

MODULE ONE VIDEO

MODULE TWO VIDEO

#NCAACconv
Coach-Athlete Relationships

Case Studies: Applying Content Knowledge to Real-Life Examples

Taking Action: Referring a Student-Athlete

MODULE THREE VIDEO

MODULE FOUR VIDEO

MODULE FIVE VIDEO

Taking Action: Talking with the Student-Athlete

chatham UNIVERSITY

Before you begin, please submit your unique code name for this survey. Your code name is comprised of your mother’s maiden name, followed by the last four digits of your phone number (ex: Smith7964).
Program Evaluation

• *Pre- and Post-Course Surveys*
  – Learning Objectives (18 items)
  – Stigma Towards Depressed Students Measure (14 items)
  – Open-ended prompt for questions and comments

Jorm, Kitchener, Sawyer, Scales, & Cvetkovski, 2010
Results

- **RQ1**: What is the impact of a brief web-based educational module on coaches’ self-reported knowledge of (a) rapport building with SAs, (b) help seeking behaviors of SAs, (c) and the mental health referral process?
- **Across the board, participants demonstrated statistically significant gains in their self-assessments.**

<table>
<thead>
<tr>
<th>Paired Samples Statistics</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>N</td>
<td>Std. Deviation</td>
</tr>
<tr>
<td>Paired</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PreTest</td>
<td>2.1818</td>
<td>11</td>
<td>.96407</td>
</tr>
<tr>
<td>PostTest</td>
<td>1.9899</td>
<td>11</td>
<td>.92099</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Paired Samples Correlations</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>Correlation</td>
</tr>
<tr>
<td>Paired</td>
<td>11</td>
<td>.660</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Paired Samples Test</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>Std. Deviation</td>
<td>Std. Error Mean</td>
<td>95% Confidence Interval of the Difference</td>
<td>t</td>
<td>df</td>
<td>Sig. (2-tailed)</td>
<td></td>
</tr>
<tr>
<td>Paired</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PreTest - PostTest</td>
<td>0.1929</td>
<td>.47779</td>
<td>.46666</td>
<td>.05866</td>
<td>5.499</td>
<td>10</td>
<td>.000</td>
<td></td>
</tr>
</tbody>
</table>

2019 CONVENTION
ORLANDO
Results

- Interestingly, participants also demonstrated a trending (non-significant) decrease in their self-ratings of stigma toward students struggling with depression. No decreases were found in participants’ ratings of the stigma they believed others would have in the same circumstances.

### Paired Samples Statistics

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error</th>
<th>Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pair 1:</td>
<td>JennyPreSelfStigma</td>
<td>4.0143</td>
<td>10</td>
<td>51924</td>
</tr>
<tr>
<td></td>
<td>JennyPostSelfStigma</td>
<td>4.2143</td>
<td>10</td>
<td>59113</td>
</tr>
<tr>
<td>Pair 2:</td>
<td>JennyPreOthersStigma</td>
<td>2.0143</td>
<td>10</td>
<td>59113</td>
</tr>
<tr>
<td></td>
<td>JennyPostOthersStigma</td>
<td>2.5714</td>
<td>10</td>
<td>87027</td>
</tr>
</tbody>
</table>

### Paired Samples Correlations

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>Correlation</th>
<th>Sig</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pair 1: JennyPreSelfStigma &amp; JennyPostSelfStigma</td>
<td>10</td>
<td>.764</td>
<td>.019</td>
</tr>
<tr>
<td>Pair 2: JennyPreOthersStigma &amp; JennyPostOthersStigma</td>
<td>10</td>
<td>.498</td>
<td>.143</td>
</tr>
</tbody>
</table>

### Paired Samples Test

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error</th>
<th>95% Confidence Interval of the Difference</th>
<th>t</th>
<th>df</th>
<th>Sig .95 (2-tailed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pair 1:</td>
<td>JennyPreSelfStigma - JennyPostSelfStigma</td>
<td>-2.2000</td>
<td>3.0003</td>
<td>1.1271</td>
<td>-5.5756, 1.1756, -2.030</td>
<td>t</td>
<td>df</td>
</tr>
<tr>
<td>Pair 2:</td>
<td>JennyPreOthersStigma - JennyPostOthersStigma</td>
<td>3.5435</td>
<td>7.7043</td>
<td>3.4374</td>
<td>-5.6863, 5.6863, 1.78</td>
<td>t</td>
<td>df</td>
</tr>
</tbody>
</table>
Results

• **RQ2**: What is the feasibility of the online training program?
  – Participants were able to access the modules and complete the training at their own pace.
  – The total time commitment was 90 minutes; most coaches felt this was reasonable, but some did not complete the entire training.
  – Examination of open-ended prompts indicated that the online format was effective.
Discussion & Practical Applications

• Overall, coaches who completed the 90-minute online training felt more educated, prepared, and comfortable managing the potential mental health concerns of their student-athletes.

• The training modules can be adopted for use by other NCAA institutions, and content could be modified to be specific to each campus.
Limitations & Future Directions

• Our sample size was small and therefore generalizability of our results should be viewed with caution.

• Future research is needed to assess the impact of online training courses with a larger, more diverse sample of coaches from a broader spectrum of institutions, including Divisions I, II, and III.
MARY JO LOUGHRAN
MLOUGHRAN@CHATHAM.EDU

LEIGH SKVARLA
L.BRYANT@CHATHAM.EDU

REFERENCE LIST IS AVAILABLE UPON REQUEST

#NCAACconv